

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 128

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Aaron T Shepley

Mailing Address 385 Millennium Drive

City State Zip Code
 Crystal Lake IL 60012-3740

FEC ID number of contributing federal political committee.

C

Name of Employer

Centegra Health System

Occupation

Senior Vice President and General Coun

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 16 2011

Transaction ID : 19552254

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Harry Wolin

Mailing Address P O Box 530

City State Zip Code
 Havana IL 62644-0530

FEC ID number of contributing federal political committee.

C

Name of Employer

Mason District Hospital

Occupation

Administrator and Chief Executive Offi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 16 2011

Transaction ID : 19552268

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Daniel J Woods

Mailing Address 503 North Maple Street

City State Zip Code
 Effingham IL 62401-2006

FEC ID number of contributing federal political committee.

C

Name of Employer

St. Anthony's Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 16 2011

Transaction ID : 19552269

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00